

Asthma Alliance of Indianapolis

National Exemplary Award - 2007

Background: The Asthma Alliance of Indianapolis (AAI) was formed in 1997 as a result of the Inaugural Community Health Assessment in 1995, an endeavor of the Marion County Health Department (MCHD) and area hospitals. The assessment identified pediatric asthma as a critical public health concern in Marion County. AAI was formed to serve the needs of the community in regard to asthma through a multi-disciplinary approach to education, prevention, and the treatment of asthma. The results of this assessment pushed a partnership to begin to form. It consists of health care professionals with varied backgrounds, including pediatric medicine, nursing, respiratory therapy, social work and environmental specialists. The mission of AAI is to provide individuals affected by asthma with the knowledge and skills to improve their health and quality of life. Education programs have provided the backbone of services offered by the Alliance. AAI instructs students, school personnel, parents, and community groups about asthma. All services are free of charge and can be structured for individual needs.

In 2006, AAI reached 269 schools and community based groups through workshops and health fairs and reached over 56,000 participants. Current estimated population in Indianapolis is about 850,000, with Greater Indianapolis being over 1 million. Asthma rates for Schools are about 17% while 30% of the Head Start population has symptoms associated with asthma. AAI provides comprehensive support to the estimated 25,000 children and 51,000 adults impacted by this disease in Marion County.

Partners: Marion County public, religious, and private schools; Family Development Services, Inc./Head Start; Wishard Health Services/Indiana University Medical Group; HealthNet Health Centers; St. Vincent Hospital Outpatient Asthma Program; Faith-based organizations; Clarian Health Partners; All programs offered by the Marion County Health Department; and, Corporate sponsors.

Key Drivers and Program Areas:

Committed Leaders and Champions: Robin Costley, CRT, is a full-time asthma educator and program manager staff for AAI and functions as the current chair of AAI. This position has been fully supported by Marion County Health Department (MCHD) for more than seven years through various funding streams. As chair of the AAI, Ms. Costley oversees the planning, coordination, and implementation of its activities, which includes promoting the health and well being of community residents by providing asthma-education services to patients who have asthma and to their families at schools and community sites. She also develops policies, procedures, and guidelines relative to asthma in the community and serves as a consultant on asthma issues to physicians, public health nurses, hospital and nursing home personnel, schools and other institutions.

AAI members have determined that AAI is a laterally organized coalition, with decision-making occurring within committees and approved by consensus by the full membership. The primary focus of AAI is service delivery. The current leadership structure of AAI was created in 2003 and is composed of a chairperson, a chairperson-elect, and the chairpersons of the four committees: (1) School Education and World Asthma Day (Develops goals, objectives, and outlines for all school education programs and oversees their development (with a focus on schools with high rates) and assists with the planning and implementation of the World Asthma Day poster contest and celebration (prior year, had 25 sponsors)) (2) Professional Education (Develops & hosts yearly professional education conference, develops guidelines for the AAI listserv, and oversees the planning of the AAI evening meetings, and offers training to professionals needing hands-on education on the many tools necessary to manage asthma in their patient population. Partnering with ISDH for continuing medical education training); (3) Fundraising (Since 2003, has conducted an annual golf tournament aimed at raising awareness among business organizations of the challenges of living with asthma and community businesses have donated prizes to supplement the event); and, (4) Community Outreach (Oversees all community outreach programs other than the school programs by participating in many health fairs throughout the community, developing Asthma Resource Binder which is in all Marion County Public libraries and is working with the Girl Scouts to offer a patch on asthma education curriculum). The development of the committees in 2003 proved to be a great step for AAI. Each committee immediately established goals and began working on the strategies necessary to achieve those goals. An example of this is the Community Outreach Committee's creation of the Library Resource Binder.

Indiana's largest hospital system, Clarian Health Partners, held the Chair position during 2003–2004; Marion County Health Department (MCHD) held the Chair position during 2005–2006; and St. Vincent Hospital will hold the Chair position during 2007–2008. A subsequent strategic planning session is being developed for 2007. Regular communication via a listserv, consistent annual events occurs. Responsibilities of the Governance Board include spreading the word about the services of AAI and finding organizational members who can help with funding of

asthma-management items. The Governance Board also shares successes and helps other communities outside of Marion County to initiate a coalition in their community. Responsibilities of the Chair of the Governance Board include chairing all board meetings; setting meeting agendas; determining meeting locations; working with MCHD administration; overseeing research projects, grant opportunities, and data collection for AAI; and overseeing the AAI web site, which is sponsored by Clarian Health Partners.

Strong Community Ties: Asthma Alliance of Indianapolis (AAI) membership consists of more than 60 diverse partners from local health care, educational, business, and social service organizations. In addition to AAI leaders, who organize, direct, and provide program administration, core members assume specific roles and responsibilities, cooperating members publicly support AAI and encourage others to contribute time and action, and community supporters sustain the coalition at key intervals. Activities include: World Asthma Day Poster Contest (with winning poster displayed in neighborhood of winner, courtesy of Clear Channel Communications); and Head Start Asthma Screening; and, working with MN Asthma Program to replicate *Coaches Clipboard* to educate coaches and physical education instructors about asthma.

High-Performing Collaborations and Partnerships: Schools continue to be an important partner in outreach and education. AAI instructs students, school personnel (including coaches), custodians, and parents. Specific workshops include: (1) *What is Asthma?* A program for students in grades 1-8 - clearly defines asthma, teaches students how to recognize warning signs of an asthma attack, and identifies common triggers of asthma attacks. Presentation of pig lungs constitutes a visual learning approach to understanding lung function. (2) *Open Airways* (3) *Parents as Asthma Managers* - A program that is offered during parent-teacher meetings and assists families living with asthma by teaching parents to ask the right questions of their health care providers. (4) *School Staff Workshop*, and, (5) *U.S. EPA's IAQ Tools for Schools Program*. In addition, AAI is a current recipient of the *Asthma Friendly Schools Initiative* from ALA National.

Clarian has provided strong support by providing educators, committee chairs, development of current governance board, Website sponsor and gold corporate sponsor. Annually Clarian offers support in staff, funds and planning of World Asthma Day and the Golf Tournament. Additionally, AAI offers annual "gadget training" and refresher course on asthma to all staff at Clarian's neighborhood clinics. Five Clarian/ HealthNet clinics helped educate and distribute 73 peak flow meters and 96 spacers in 2006.

Collaboration with other partners are critical for success, including working with the statewide IN Joint Asthma Coalition, Head Start, ALA, other area hospitals (who will refer patients that are being seen a lot for home inspections and support interventions).. Also, working with some none traditional partners, such as realtors/landlord associations and custodial groups.

Integrated Health Care Services:

Asthma Referral Service - AAI offers the extension of resources and free services to these clients through its *Asthma Referral Service*, which was initiated in 2001. Home environmental assessments and smoking cessation services are examples of this extension of resources, as well as the provision of needed management tools to families who would otherwise be unable to obtain them. A database was designed to record and track information from this referral service and is part of the electronic charting system, *Insight*, for MCHD. Remediation data is also collected and reported to interested parties and used as coalition building leverage for future endeavors. Reports are sent to the referral source and healthcare provider with proper documentation Health Insurance Portability and Accountability Act of 1996 (HIPAA). This referral system helps the asthma care team across the board, including school personnel. The client also receives a copy of what triggers were identified and what education and training were given during home visits. The numbers of visits varies for each client in relation to the assistance needed and follow up to assess results, negative and positive. If AAI discovers a high amount of hospitalizations from a client, it will offer to do home inspections and support interventions.

Importance that the AAI is housed in the County Health Department is that the integrated referral service allows to various programs to be tied to the AAI work. The MCHD staff is trained on asthma triggers even if they are in the homes for other reasons (e.g., insurance sign up, rodent control for neighborhoods, public health department nursing services, smoking cessation, etc.).

Local University Respiratory Therapy Programs, IN State Department of Health Resident Program - As part of its efforts to enhance coordination of asthma prevention, treatment, and education among various organizations in Marion County, the Asthma Alliance of Indianapolis (AAI) is a preceptor site for IN Vocational Technical College and Clarian Health and affiliated universities' respiratory therapy programs. As part of their required curriculum in 2006, students in these programs were required to perform community activities to receive their degree. AAI

provides training to these students so that they can assist with AAI outreach requests. IN State Department of Health Resident program also participates in this training and preceptor program. The Residents also assist with workshops, community outreach, and environmental home visits to help broaden their scope of asthma care.

Schools and Policy Change: In 2001, IN law allowed children with asthma to carry inhalers. AAI developed the *Contract to Carry*, which was signed once a questionnaire was completed (where parent asked child 7 questions). Once the contract is signed by the student, parent, health care provider, and the school personnel responsible for treating the child's asthma the student may have the privilege to carry their own inhalers. This privilege may be revoked if they violate the contract. This contract has helped to make school personnel more comfortable with students carrying their own inhalers and involves the whole team caring for the student's asthma.

Tailored Environmental Interventions: The Indoor Air Quality Program (IAQP) at MCHD, specifically their assigned staff person, Lisa Cauldwell, MPH works closely with AAI to provide education and resources for mediating and eliminating environmental asthma triggers. The program responds to requests for home assessments with families and individuals who are experiencing difficulty managing their illness. Through the years, Ms. Cauldwell has established working relationships with each school district in Marion County and has become a trusted resource for schools wishing to establish an asthma-friendly environment for all students. AAI's in-home environmental assessments provide the missing link to many health-care providers' asthma management plans. A current and more appropriate plan is created once triggers are identified and education is provided about these triggers to the family. This helps to establish some long-term healthy habits for care. Case management becomes a part of the visit, ensuring that all needs are addressed and that families have access to appropriate programs. Remediation techniques are made as simple as possible, and regular maintenance is encouraged. When the Head Start environmental home visit program began it was evident in the first few home visits that these low-income families did not have access to vacuums and effective roach removal. AAI has been able to provide needed items for the children with moderate to severe asthma. Funds and donations were made to purchase and distribute these items.

Currently, the IAQP completes about 72 home visits per year to support the referral service. However, they do many more home visits (including code enforcement) and since they are so integrated into the AAI work, they know to be aware of and educate families of people with asthma when they are in these situations.

Other services available to the community include education to schools and organizations about proper pest-management practices, maintenance activities, and similar guidelines established by the U.S. EPA in regard to environmental interventions. Regardless of the setting, asthma triggers such as mold and moisture, dust mites, cockroaches. AAI partners with Indianapolis' voluntary ozone-reduction program in an effort to decrease asthma episodes. Educating people with asthma about the dangers of increased ozone levels increases the odds of reduced asthma episodes.

As of March 2006, AAI community outreach programs have encouraged nearly 4,000 individuals to make the pledge to a smoke-free home through the U.S. EPA's Take it Outside campaign. This effort will continue through community education. AAI partners also include Smokefree Indy, Smokefree IN & IN Tobacco Prevention and Cessation Agency. Smokefree IN collaborated with AAI for the parent and staff training at Head Start in 2005-06.

Positive Health Outcomes: Overall data and surveillance is provided through the Epidemiology Department of the Health and Hospital Corporation of Marion County. Community health educators impact are tracked, which includes nurses and RTs. The number of urgent treatments that are needed in the school day for students and staff were tracked at Washington & Pike township school corporations. This final report for *Improving Indianapolis School Environment to Reduce Asthma Morbidity* is completed.

Program Sustainability and Financing: AAI is sustainable, in a large part, as a result of the Inaugural Community Health Assessment in 1995, an endeavor of the Marion County Health Department (MCHD) and area hospitals, identifying asthma as a major concern for the community. Since housed in MCHD, which has the associated hospital corporation as a part of its system, this unique situation allowed AAI to take advantage of many of MCHD's existing resources. A large percentage of AAI funding is supported by the county – 2 staff people (with a 3rd person floating depending on available county funds) and administrators are all county employees. Attempting to justify need for Health Educator position - trying to get funds from the hospital to match, since competition for funded positions in health department can be great.

Grants are supplemental and provide support to some of the detail work that provide tangible items/resources to the community. Some grants have included: starting in 1997, AAI was funded by NHLBI for 3 years; several U.S. EPA grants; and, funding from the ALA..

Lessons Learned:

- What was found was that most children with asthma did have a proper diagnosis, but that their asthma was not being managed according to national guidelines, which altered AAI's strategy in the first year of screening.
- Until coalitions can find support or resources, coalitions sometimes can make due with what they or their partners have – finding that opportunity is part of this.
- Coalitions shouldn't re-invent the wheel. A lot of materials are out there, and AAI/MCHD has provided a lot of their early developed materials to nearby counties working to develop their own asthma coalitions.
- In many instances where AAI is supporting case management, when a situation seems too overwhelming, it is important to start small and work towards the more complex issues. Little successes can help families feel more confident about helping the person with asthma manage their disease.

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Program Location:

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